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RECIPIENT/ PHONE NO.	FAX NO.	COMPANY/ CITY, STATE, COUNTRY
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Brenda O. Holmes

FROM

PAGES (WITH COVER)

6559

REFERENCE NO

44471/294110

CLIENT/MATTER NO.

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**COMMENTS**

Applicant: Tadashi Minotani et al.  
Title: Transceiver Capable of Causing Series Resonance with  
Parasitic Capacitance  
Serial No./Docket No.: 10/699,516 44471/294110  
Filed: 10/31/2003

**PAPERS SUBMITTED:**

1. PTO/SB/21 - Transmittal form;
2. PTO/SB/06 - Patent Application Fee Determination Record;
3. PTO/SB/22 - Petition for Extension of time (1 month);
4. PTO-2038 - Credit Card Payment Form;
5. First Response in application to non-final Office Action of 07/27/2005; and
6. Supplemental Information Disclosure Statement.

Date: October 28, 2005  
By: Brenda O. Holmes, Reg. No. 40,339

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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/699,516
	Filing Date	10/31/2003
	First Named Inventor	Tadashi MINOTANI et al.
	Art Unit	2683
	Examiner Name	Congvan Tran
Total Number of Pages in This Submission	Attorney Docket Number	44471/294110

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1) PTO/SB/06 - Fee Determination Record; 2) PTO-2038 Credit Card Payment Form.
Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	KILPATRICK STOCKTON LLP		
Signature	<i>Brenda O. Holmes</i>		
Printed name	Brenda O. Holmes		
Date	10/28/2005	Reg. No.	40,339

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO's Centralized Facsimile Number (571) 273.8300 on the date shown below.		
Signature	<i>Janie Wilkins</i>	
Typed or printed name	Janie Wilkins	Date 10/28/2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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